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(mi) E (a)) AIMS If the s sheets is \$250 additio	MBER FILEI N/A N/A N/A MINUS MIN	20 = 3 = n and drawing: the application small entity) fe ets or fraction (1)(G) and 37 C CFR 1 16(ji)	MBER EXTRA N/A N/A N/A s exceed 100 size fee due or each thereof. See FR 1.16(s).	X\$ 2 X10	TE (\$)	FEE (6) 150.00 \$250 \$100	_	OTHE SMAL (\$) N/A N/A N/A X\$50 . X200 .	FEE (5) 300.00 \$500
(m) E (a)) AIMS If the s sheets is \$250 additio 35 U.S DENT CLAIM PR column 1 is less	N/A N/A N/A Minus minus pecificatio of paper, (\$125 for nal 50 she C. 41(a)(1) ESENT (37)	20 = 3 = 1 n and drawing: the application small entity) frets or fraction ()(G) and 37 C CFR I 16(ji)	N/A N/A N/A s exceed 100 size fee due or each thereof. See FR 1.16(s).	X\$ 2 X10	WA WA 25	150.00 \$250		N/A N/A N/A X\$50	300.00 \$500
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AIMS If the s sheets is \$250 additio 35 U.S DENT CLAIM PR column 1 is less	minus pecificatio of paper, (\$125 for al 50 she .C. 41(a)(1 ESENT (37	n and drawing the application small entity) fr ets or fraction ()(G) and 37 C CFR (16(j))	s exceed 100 size fee due or each thereof. See FR 1.16(s).	XS 2 X10	25 .	\$100	OR	X\$50 . X200 .	+
AIMS If the services sheets is \$250 addition 35 U.S. DENT CLAIM PRODumn 1 is less	minus pecificatio of paper (\$125 for nal 50 she C. 41(a)(1 ESENT (37	n and drawing the application small entity) fr ets or fraction ()(G) and 37 C CFR (16(j))	size fee due or each thereof. See FR 1.16(s).	+16	ю.		OR .	X200	
If the s sheets is \$250 additio 35 U.S	minus pecificatio of paper (\$125 for nal 50 she C. 41(a)(1 ESENT (37	n and drawing the application small entity) fr ets or fraction ()(G) and 37 C CFR (16(j))	size fee due or each thereof. See FR 1.16(s).	+16				X200	
sheets is \$250 additio 35 U.S DENT CLAIM PR column 1 is less	pecification of paper, (\$125 for half 50 she C. 41(a)(1) ESENT (37) han zero. e	n and drawing: the application small entity) fe ets or fraction ()(G) and 37 C CFR 1 16(j)	size fee due or each thereof. See FR 1.16(s).	J [)O=				
column 1 is less	han zero, e		n 2.	J [10=		1	+360=	
	•	nter "O" in colum	n 2.						
LICATION AS	AMEND			TO	TAL		1	TOTAL	
(Column 1)		(Column 2)	[[(Column 3)	SI	MALL E	NTITY	OR	OTHER	R THAN ENTITY
CLAIMS REMAINING AFTER AMENDMENT	-	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	(5)	ADDI- TIONAL FEE (\$)		RATE (\$)	- ADDI- TIONAL FEE (\$)
. 33	Minus	23	=	X\$ 25	, .		OR	X\$50 _	
a	Minus	" ع	=	X100	, _	1		X200 _	1.
AMENDMENT PAID FOR Total (37 CFR 1.16(ii)) Independent (37 CFR 1.16(h)) Application Size Fee (37 CFR 1.16(s))									
ATION OF MULTIP	E DEPENDE	ENT CLAIM (37 C	FR 1.16@)	+180	=	\ ·	OR	+360=	
			•	ADD'L I	TEE _		OR	TOTAL ADD'L FEE) .
(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE	(5)	ADDI- TIONAL		RATE (\$)	ADDI- TIONAL
•	Minus	**	=	X\$ 25	; _	(3)		X\$50 -	· FEE (\$)
•	Minus	• • •	a.	<u> </u>			- T	Y200	
Fee (37 CFR 1.1	6(s))						× 1		
TION OF MULTIPL	E DEPENDE	T CLAIM (37 CF	R 1.16(j)	+180	<u>.</u> T		OR	+360=	
				TOTAL ADD L FI					
	(Column 1) CLAIMS REMAINING AFTER. AMENDMENT	(Column 1) CLAIMS REMAINING AFTER AMENDMENT Minus Fee (37 CFR 1.16(s))	(Column 1) (Column 2) CLAIMS REMAINING AFTER. AMENDMENT Minus (Column 2) (MigHest NUMBER PREVIOUSLY PAID FOR	(Column 1) (Column 2) (Column 3) CLAIMS REMAINING AFTER. AMENDMENT Minus Minus CLAIMS PREVIOUSLY PAID FOR Minus Minu	TOTAL ADD'L I (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST NUMBER PRESENT EXTRA AMENDMENT PREVIOUSLY PAID FOR Minus *** Minus *** Minus *** Minus *** Minus *** Minus *** Minus ** TOTAL ADD'L I COlumn 3) RATE ** ** ** ** ** ** ** ** **	Fee (37 CFR 1.16(s))	TOTAL ADDITION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16@) (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST NUMBER PREVIOUSLY EXTRA AMENDMENT PREVIOUSLY PAID FOR Minus "" " " X\$ 25 Minus "" " X100 Fee (37 CFR 1.16(s)) TION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16@) +180= TOTAL ADDITEE	CColumn 1) (Column 2) (Column 3) CLAIMS HIGHEST PREVIOUSLY PAID FOR Minus "" " " " X\$ 25 OR TOTAL ADDITIONAL FEE (\$) X\$ 25 OR TOTAL ADDITIONAL FEE (\$) TOTAL ADDITEE	Fee (37 CFR 1.16(s))

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

is collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the PTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. buding gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Infermation Officer, U.S. Patent 1 Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS DRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.